## A CASE OF CREEPING ERUPTION IN A EUROPEAN IN THE GOLD COAST

В

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## PLATE I

This skin affection is stated by Crocker (1903) and by Castellani and Chalmers (1919) to have been first described by Robert Lee in 1875; according to Roubaud (1914) the disease was observed in Norway by Hoegh in 1869, while Abraham, in a review of a paper by Knowles (1916), said that cases were recorded in Edinburgh 'more than sixty years ago,' i.e., before 1856.

When a cause has been found, it has usually been a larva of a fly of the family Oestridae, particularly Gastrophilus and Hypoderma. Castellani and Chalmers (loc. cit.) state that larvae of G. haemorrhoidalis and G. nasalis, of Oestromyia satyrus and of H. bovis and H. lineata have been found. Looss said that larvae of Ancylostoma duodenale in their passage through the skin could cause it. Sakurane (1917) found a Ligula parasite in a swelling of the skin, and suggested that the parasite of creeping eruption is of this nature. Ikegami (1919) removed from a case of this disease a young worm, said to have been probably Echinorhynchus sphaerocephalus, but a structure in it like an alimentary canal suggested Gnathostoma. Tamura (1919) removed a male Gnathostoma resembling G. siamense.

The disease is reported to have occurred in Ireland, Scotland, the Shetland Isles, Norway, Sweden, Denmark, Russia and Siberia, Bulgaria, Arabia, Sumatra, China, Japan, the United States of America, Brazil and West Africa (Senegal, Sierra Leone, Liberia, Togoland, Nigeria and the Cameroons).

The form of the disease occurring in Senegal, called locally Oerbiss or Larbish, and for which no cause has been found, is considered by Roubaud to be of different aetiology from cases due to myiasis.

The following case showed a close resemblance clinically to the description of Oerbiss given by Roubaud.

Mr. G., British, living at Seccondee, Gold Coast, noticed, about the 18th of June, 1922, a small itching spot on the ball of the left thumb, and thought that it was probably due to a bite of some insect. A few days afterwards he noticed that the spot had become a line, and by the 26th of June there was a curved, raised, blisterlike line about three-quarter inch long and one-sixteenth inch in diameter. Itching and a burning sensation were considerable, especially at night. On the 6th of July the appearance was as shown in Plate I. From then onwards until the beginning of October, when opportunities of observing the case ceased, the track progressed irregularly and intermittently round and along the thumb to near the tip. No parasite was found; microscopic examinations of serum and blood taken from various parts of the track and attempts at culture in broth and on agar and blood serum were without result.

No serious attempt to cure the disease was made; an ointment of sulphur and ammoniated mercury was used by the patient, who also opened the tracks from time to time and rubbed in tincture of iodine with apparent temporary benefit.

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EXPLANATION OF PLATE I

Case of Creeping Eruption.

